File with:

lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

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Mark Leeds for Supervisor		ΙГ	FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate (2) (4)County Central Committee (5)County Candidate (6)City Candid Subdivision Candidate (8)County PAC (9)City PAC (10)School E11) Local Ballot Issue	(F	DR-2 (Rev. 12/2009) DISCLOSURE REPORT For Office Use Only		
CANDIDATE COMMITTEES ONLY:		1 [omm. #	
Candidate Name Mark Leeds	Political Party (if applicable) Republican	Sc	ogged In	
Office Sought county Supervisor	District (if Senate or House)	A	omputer	
Late reports are subject to possible civil and criminal penalties. Pure candidate's committee, and the chairperson, for any other type of co	suant to lowa Code sections 68B.32A(7) a committee, is the individual responsible for	I L Ind 68/ filing ti	A.401(3), the candidate, for a mely and accurate reports.	
Mark Leepe				
SIGNATURE OF PERSON FILING REPORT	712-225-5513 TELEPHONE		DATE SIGNED	
I AM FILING A October 19, 2010	REPORT FOR (1) ELECTION /(2)	NON-F	FI FCTION YEAR	
(report date)	Indicate by # 1			
□CHECK IF AMENDMENT TO REPORT DATED		_	nittees, enter Date of Election	
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)		November 2, 2010 County & Local Committees, enter County in thich Election is held Cherokee		
STATEMENT OF CASH ON HAND	L			
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the committee.	al of all funds held by the		49.02	
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the case of the last reporting period or must be zero if this is first	al of all funds held by the		49.02	
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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

COMMITTEE NAME (Must be same as on Statement of Organization) Mark Leeds for Supervisor CHECK THIS BOX IF AMENDING FORM	(Including candidate's personal funds)	(Rev. 07/03)	MONETARY RECEIPTS
	COMMITTEE NAME (Must be same as on Statement of Organization) Mark Leeds for Supervisor		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
07/31/10	ID# dividend CK# credit	Northstar Community Credit Union, 1030 South 2nd, Cherokee, Iowa 51012	Bank	\$.02	INCOME
08/31/10	ID# dividend CK# credit	Northstar Community Credit Union, 1030 South 2nd, Cherokee, Iowa 51012	Bank	.02	
09/30/10	iD# dividend CK# credit	Northstar Community Credit Union, 1030 South 2nd, Cherokee, Iowa 51012	Bank	.02	
	ID# CK#				
	ID# CK#				
	ID#				
	CK#				
	CK#				
	CK#				
	CK#				
	ID# CK#	·			
			SUB-TOTAL	\$	
	TOTAL (if last page of this schedule)				

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumarne of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

SCHEDULE

Reset Form